



HAWAII STATE ETHICS COMMISSION
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P.O. BOX 616, HONOLULU, HAWAII 96809
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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
Guerrero,	Anthony Jr.	Rezentes	525-6345
MAILING ADDRESS (Street)			FAX
999 Bishop Street, 29th fl.			529-6088
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
First Hawaiian Bank			525-6345
MAILING ADDRESS (Street)			FAX
999 Bishop St., 29th fl.			529-6088
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Neal Okabayashi			525-5785
MAILING ADDRESS (Street)			FAX
999 Bishop Street, Legal Department			525-5025
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture

Education

Human Services

Science, Technology &
Economic DevelopmentCommunications &
Public UtilitiesGovernment Operations &
FinanceIntergovernmental Relations,
International Affairs

Tourism & Recreation

Consumer Protection &
Commerce

Hawaiian Affairs

Labor & Employment

Transportation

Culture, Arts, Historic
Preservation

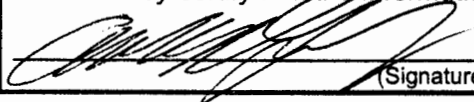
Health

Planning, Land & Water
Use ManagementOther: (indicate below)

_____Ecology, Energy
Environmental Protection

Housing

Public Safety & Corrections

PART IV CERTIFICATION OF LOBBYIST*I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.*

(Signature of Lobbyist)

1/14/05

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

Neal Okabayashi

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Vice President

NAME OF ORGANIZATION (if applicable)

First Hawaiian Bank

TELEPHONE

525-5785

MAILING ADDRESS (Street)

Legal Department, 999 Bishop St.

FAX

525-5025

(City)

Honolulu

(State)

HI

(Zip Code)

96813

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

JAN 25 2005

(Date)